



Area Plan on Aging
Federal Fiscal Years 2020-2024
Final Revisions 11.30.20

“Our mission is to enrich the lives of seniors and adults with disabilities. SeniorsPlus believes in supporting the independence, dignity and quality of life for those we serve.”

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AREA PLAN ON AGING 2020-2024

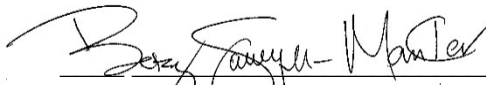
Verification of Intent

The Area Plan on Aging is hereby submitted for the Androscoggin, Oxford and Franklin County Planning and Service Area for the period FY 2020 through FY 2024. It includes all assurances and plans to be followed by the SeniorsPlus under provisions of the Older Americans Act, as amended during the period identified. The Area Agency on Aging identified will assume the full authority to develop and administer the Area Plan on Aging in accordance with all requirements of the Act and related State policy. In accepting this authority, the Area Agency on Aging assumes major responsibility to develop and administer the Area Plan for a comprehensive and coordinated system of services and to serve as the advocate and focal point for older people in the planning and service area.

The Area Plan on Aging has been developed in accordance with all rules and regulations specified under the Older Americans Act and is hereby submitted to the State Unit on Aging for approval.

November 30, 2020

Date

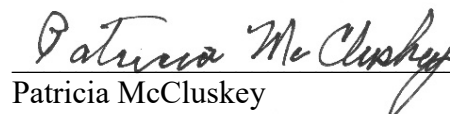


 Betsy Sawyer-Manter
 President and CEO
 SeniorsPlus

The Area Agency on Aging Advisory Council has had the opportunity to review and comment on the Area Plan on Aging. Comments are attached.

November 30, 2020

Date

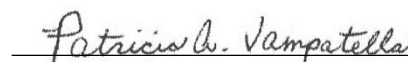


 Patricia McCluskey
 Chairperson
 SeniorsPlus Advisory Council

The governing body of the Area Agency has reviewed and approved the Area Plan on Aging.

November 30, 2020

Date



 Patricia Vampatella
 Chair of Board of Directors
 SeniorsPlus

Mission Statement, Values and Vision

Mission

Our mission is to enrich the lives of older adults and adults with disabilities. SeniorsPlus believes in supporting the independence, dignity and quality of life of those we serve.

Vision

Our vision is for SeniorsPlus to be a powerful local resource in addressing community issues, is sensitive and responsive to customer needs, and is the kind of organization that is proactive, creative and innovative in its service to the older adults.

Values

For our clients:

- Be responsive and flexible in service delivery
- Maintain accessible and welcoming facilities
- Assure quality services
- Access to information and resources are based on individual needs
- Provide professional, well trained staff
- Support client choice

For our employees:

- Recognize employees for performance and team work
- Support open two way communication
- Provide professional development opportunities
- Encourage safety and wellness
- Ensure consistent implementation of policies
- Encourage and nurture autonomy and self-directed work
- Provide competitive compensation and benefits

For our volunteers:

- Treat volunteers with respect
- Offer meaningful volunteer opportunities and training
- Support open communication between staff and volunteers

For our Communities:

- Facilitate education and information sharing about older adults and people with disabilities
- Participate actively in community partnerships
- Inform communities about our work

Purpose

The corporation's stated purpose is:

To serve as a private nonprofit organization for the assistance of older people;

- To inform and educate older adults and the public at large of the needs of, and benefits available to, older adults;
- To propose, create, develop and administer programs by and for older people in the counties of Androscoggin, Franklin and Oxford, Maine and other areas of the state as needed.
- To apply for, obtain, receive and administer funds for programs from gifts and private grants and from public grants under State and Federal programs now in effect, or hereafter becoming effective; and
- All purposes incidental to, or necessary, or expedient for the carrying out of the principal purposes above set forth.

Executive Summary

Established in 1972, SeniorsPlus is the Area Agency on Aging, and the Aging and Disability Resource Center that serves Androscoggin, Franklin and Oxford counties, located in Western Maine. All three counties are very rural except for the urban center of Lewiston/Auburn situated in the center of Androscoggin County. Areas Agencies on Aging (AAAs) is a network of approximately 622 non-profit organizations nationwide that serve the older adults (60+) and adults with disabilities in their local areas. The federal designation of an Area Agency on Aging stems from the 1965 passage of the Older Americans Act, as amended, which was established to create a comprehensive and coordinated system to care for older Americans.

Through the Older Americans Act the federal government created the Administration for Community Living (ACL) and their mission statement is “All people, regardless of age or disability, should be able to live where they choose, with people they choose, and have the ability to participate fully in their communities. Every person should have the right to make choices and to control the decisions in and about their lives. This right to self-determination includes decisions about their homes and work, as well as all the other daily choices most adults make without a second thought”. Each state was required to designate an office in the state government to address aging issues called the State Unit on Aging, which in Maine is the Office of Aging and Disability Services. A final requirement of the Older Americans Act was that each State Unit of Aging was charged with contracting on a regional level to provide Area Agencies on Aging which plan for and monitor the needs of all people over the age of 60, and their caregivers, within their designated geographic area.

SeniorsPlus serves 67 communities, which are mostly rural. In FY 2019 more than 17,000 people accessed our more than 15 programs and services ranging from Meals on Wheels, Information & Assistance, Medicare Counseling, Evidence-Based Classes to Money Minders and Family Caregiver Support and more. Our Information & Assistance program provided information and resources to 17,057 people. A few examples of the need for services provided by SeniorsPlus are evident when you look at our Nutrition Program serving over 130,000 meals to 2,470 people (unduplicated count) through our Meals on Wheels and congregate dining options; 257 family Caregivers and those needing assistance with Respite services; and 2,168 people through our State Health Insurance Program (SHIP) by assisting them with navigating the Medicare programs and options so they could make informed decisions based on their unique needs. This program alone saved people in our geographic area over \$452,049 in prescription drug costs in FY 2019.

Like all Area Agencies on Aging we are challenged by the breadth of the aging people accessing our services. While we find Baby Boomers (the young old) tend to be more tech savvy and want to have services available through technology, the middle old (68-74) still want a face-to-face more social interaction, and finally the older old (75+) may need us to deliver services in their homes or in their local community. In many scenarios there are caregivers who may fall into one of these three categories who are also providing support and care for an older adult or an adult with disabilities. A common thread to all groups is the desire to remain as healthy, active and independent as possible in their communities. This 2020-2024 area plan will focus on connecting with and adapting services to older and disabled adults and their caregivers.

As part of our mission we will continue to provide the services that are funded through the Older Americans Act. For each of these services, we will look at how we can expand, improve and change to meet the ever-changing needs of our populations. These services include:

- Nutrition services, including Meals on Wheels, Social Dining Cafes and the Around Town dining program, with a special focus on increasing awareness of programs that are available for those affected by food insecurity and social isolation.
- Information & Assistance, including Options Counseling and Medicare Counseling.
- Caregiver support and education.
- Education, including evidence-based prevention and wellness classes.

Our listening sessions and surveys conducted with older adults and caregivers in Androscoggin, Franklin and Oxford counties reinforced there is still much work to be done to reach those who could benefit from our services. In order to expand our work and reach more people while relying on the same or fewer resources we will need to focus our efforts on the following areas:

1. **Increase awareness of local services** for older adults and adults with disabilities and their caregivers by promoting SeniorsPlus as a valuable resource of information and service navigation with an emphasis on transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities.
 - We will create and distribute 7500 pieces of marketing information to healthcare practices, municipal offices, and other places that older people and adults with disabilities frequent.
 - We will provide community education to providers, community groups, age friendly communities, and the general public on programs and services available to older Mainers, adults with disabilities and care partners.
2. **Improve access to services and programs** for underserved populations and their caregivers, such as older New Mainers, LGBTQ older adults, older adults experiencing homelessness, rural communities, older adults with limited English proficiency, and older adults with sensory impairments.
 - We will host open houses in each SeniorsPlus location.
 - We will leverage partnerships with other CBO's to promote the ADRC.
 - We will ensure all direct service staff complete cultural consideration training and that employment openings are distributed through culturally diverse mediums.
 - We will identify natural gathering locations of underserved populations and assess viability of delivering services at those locations.
3. **Expand nutrition and socialization** opportunities by ensuring access to local congregate dining options and enhancing the quality and variety of meals offered to older Mainers to allow for personal choice, dietary restrictions, and cultural differences.
 - We will build partnerships with restaurants, non-profit and community based entities to combine congregate dining with other social activities.
 - Survey clients and community partners to assess activities and amenities for recruiting and maintaining congregate dining participants.
 - Offer specialized meal plans to individuals based on cultural preference, personal choice, and health status.
4. **Provide opportunities** for older adults and adults with disabilities, and their caregivers to remain active and healthy in their communities of choice for as long as possible by expanding the

offering of evidence-based programs, including, but not limited to, SAVVY Caregiver, falls prevention, diabetes and chronic disease self-management.

- We will promote and offer evidence-based programs in underserved areas.
- As a joint venture partner in Healthy Living for ME, we will actively seek new and innovative funding sources.

5. **Educate caregivers and increase awareness** of services available to them such as SAVVY Caregiver, support groups and counseling, and explore development of services to address the unique needs and challenges of the older relative caregiver.

- We will continue to identify all sources of support for caregivers/partners.
- We will provide education to care partners on services available to them such as Savvy Caregiver Training, support groups, and counseling.
- As part of the Dementia Capable Maine grant, we will provide enhanced services to care partners in the form of home delivered meals, REACH Community™, intensive care management, and Music and Memory™.

In summary, SeniorsPlus is a trusted resource to those who know us. We have established programs and services that address the needs of many in our geographic footprint. These are traditional urban and rural Mainers who have histories of being fiercely independent who only ask for help as a last resort. We have worked to become an agency that also provides proactive, preventative and healthy aging programming. We have found that older adults want to remain active, connected to their communities and have a sense of purpose. The areas of focus in our 2020-2024 Area Plan take all of this into consideration as we continue to provide our core services and expand efforts in the areas identified in the plan.

Context

For years, Maine has held the distinction of being the country's oldest state. Maine also has the largest proportion of its population living in rural areas. SeniorsPlus serves two of the most rural counties in Maine; Franklin and Oxford Counties. SeniorsPlus also serves Androscoggin County which includes one of three urbanized areas in Maine – the Lewiston/Auburn area of Androscoggin County.

The 2013-2017 American Community Survey reports that the median age in Maine is 44.3 years old. This represents a steady increase totaling 2.9 years since 2009. While the older population of Maine has increased, the 2018 Community Survey reports total population decreases in all 3 counties served by SeniorsPlus. Census estimates that total population of all three counties for 2018 was 175,194, while the total population of people over 65 is 38,279 or 21.85% of the total population. More than 1 in 5 people in the SeniorsPlus catchment area is over 65 years old. The latest American Community Survey also estimates that those living below the federal poverty level in the tri-county area is as high as 15.2%.

These statistics represent a stark increase in median age and need in rural areas that are habitually underserved. Concurrently, there are no increases in resources or funding patterns that could adequately address these needs. Instead, SeniorsPlus faces decreases in funding for services provided to older adults and adults with disabilities. The challenge is how to serve more people with fewer resources. How do we increase quantity of service delivery while maintaining quality services? How do we ensure quality of life

while supporting people to acquire basic necessities of life and to remain at home for as long as possible? Living at home, as independently as possible, is the goal of the people served by SeniorsPlus and the mission of SeniorsPlus. It is good public policy to help people live in their homes and communities, not only because it is less costly financially, but it also keeps the fabric of community intergenerational and healthy.

The recent needs assessments conducted by the University of Southern Maine finds that our populations are struggling in particular with transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities. Social and economic factors create barriers within these domains that prevent our populations from achieving their goals and in turn increasing costs to society.

This same needs assessments conducted by the University of Southern Maine, included survey respondents and focus group participants from the catchment area of SeniorsPlus in Western Maine. The 2019 Study, cites the domains listed above as concerns for participants as well as nutrition, falls, dental needs, and medication affordability. Of the respondents who reported not receiving help, the most common reason was not knowing who to ask for help.

SeniorsPlus will address these challenges through the five pillars of The Administration for Community Living; connecting people to resources; strengthening our networks; protecting rights and preventing abuse; supporting families and caregivers; and expanding employment opportunities.

Our population is older than any other time in human history. In this way it is a new population and with that also comes new challenges and needs that must be addressed. However, the changing demographics also present new opportunities and resources. SeniorsPlus values the population it serves and will partner with our clients to meet the mutual goals we have established. We serve a population rich in the experience, knowledge, and skills that we need to lead our communities into the future.

SeniorsPlus, the Office of Aging and Disability Services of the State of Maine, the Administration on Community Living, and the individuals we serve will work to build communities that are supportive to all its citizens, regardless of age, diversity or disability, as they seek to stay home living their best lives as they age.

Focus Areas

Area Plans must include measurable strategies and performance measures that address Area Plan requirements within each focus area below that is applicable to your planning and service area. In developing strategies and performance measures, consider the role these focus areas serve in optimizing home and community-based services and programs for older adults and their caregivers.

A. Older Americans Act (OAA) Core Programs

OAA programs are encompassed in Titles III (Supportive Services, Nutrition, Disease Prevention/Health Promotion, and Caregiver Programs), VI (Native American Programs), and VII (Elder Rights Programs), and serve as the foundation of the national aging services network.

1. Coordinating Title III programs with Title VI Native American programs; SeniorsPlus does not have any tribal entities in our catchment area.
2. Strengthening or expand Title III & VII services; SeniorsPlus has strong Nutrition, Information and Assistance and Family Caregiver Support services.

Nutrition:

Nutrition services are a key entryway in assessing the needs of older people and people with disabilities in Oxford, Franklin and Androscoggin counties. It is often the service gateway that allows us to be in homes where we can establish a strong connection while building trust with clients and families. Many referrals to other Area Agencies on Aging (AAA) services happen as a result of a Meals on Wheels assessor or deliverer uncovering an unmet need while in the home.

In 2019, SeniorsPlus delivered over 130,000 meals through congregate and home delivered meals. We continue to grow our relationship with area restaurants to expand the option of dining out with friends and family, further reducing social isolation. We are contracting with insurers to expand our diversity of meal offerings, targeting those with Congestive Heart Failure (CHF) and Renal Failure. Halal meals are available to Somali clients upon request.

Along with Meals on Wheels (MOW), we also offer “Books on Wheels”, a partnership with local libraries to engage people in reading and as members of the local community libraries. “Pets on Wheels”, a pet food distribution program, is piggybacked on the meal deliveries as well.

We have added a new meal service, Meals to Recovery, which is aimed at helping people recently hospitalized, rehabbed or home from a day surgery, to receive up to four weeks of home delivered meals. The goal is to reduce readmissions and visits to emergency departments. We often find that the person qualifies for nutrition services and they remain on the MOW program.

Information and Assistance:

SeniorsPlus has a strong information and assistance service delivery system. We have office locations in each of the three counties that we serve. In 2019, 31,744 inquiries were responded to

by our Community Services Specialists. Our staff are primarily licensed social workers with strong backgrounds in aging services. Our goal is to respond to every call within 24 hours of receipt. We often find that the presenting issue is only one of several that the client needs assistance with, leading to short term case management.

While most of the work is done telephonically, we often are meeting one on one with clients and families. We do this through appointments at our offices and less frequently at home visits.

We have an established electronic referral system with many physician practices called “Community Links”. This allows the practice to send us a secure referral which is followed up by staff and an outcome message is returned to the referring practice.

The community services team is also responsible for Money Minders, a program that matches volunteers and clients to insure that budgets are in place, bills are paid timely and that any suspicious activity that might be fraud or exploitation is identified and stopped.

SeniorsPlus also has a Veteran’s Independence Program agreement with the VA. This allows us to accept referrals from the state Veterans’ Administration (VA) office to support veterans to remain home and to self-direct their services.

Family Caregiver Support:

Maine is a state that is very old and aging further. The backbone of the care system in Maine is family caregivers. We support family caregivers through phone support, support groups and respite. Additionally, we offer SAVVY caregiver training in all three counties. We currently support 257 caregivers and provided 12,064 hours of service in 2019 through these service options.

In 2019, we received an Administration for Community Living (ACL) Alzheimer’s Disease and Related Dementia (ADRD) demonstration grant that will target significant resources to family caregivers. Dementia Capable Maine will cover seven of the sixteen counties in Maine.

Education Center:

SeniorsPlus has an education center in our Androscoggin county location that offers classes on a myriad of topics ranging from healthy cooking to avoiding scams and cons. The center is a gathering place for reconnecting with old friends and making new ones. It is very participant driven, with many of the topic ideas coming directly from the people using the center. We offer a number of evidence based programs as well chair yoga and other exercise programs. Each month a calendar is mailed or emailed out to clients. In 2019 we served 1006 unduplicated people and offered 481 classes.

We replicate a number of the classes at our offices in Franklin and Oxford counties.

3. Increasing the business acumen of the area agency on aging;

SeniorsPlus is a full partner in a joint venture partnership with two other AAA's in Maine, Spectrum Generations and Aroostook Agency on Aging, called Healthy Living for ME (HL4ME). Currently the focus of the venture is evidence based programs that address chronic disease, pain management and falls prevention. The statewide network builds upon existing classes and is constantly developing new partnerships that allow more coverage and accessibility outside of the service center communities. The platform has a centralized data base that provides easy access to class information and availability along with a mechanism to track outcome data. The vision is that this platform can be used to deliver statewide services desired by 3rd party payers.

We also have a contract with the local “marketplace” insurer, Community Health Options. We provide assessment and case management around social determinants of health that impact healthcare utilization. We are in the process of expanding it to include home delivered meals and transportation coordination.

4. Working towards the integration of health care and social services systems;

The work we are doing with Community Health Options and Healthy Living for ME are both examples of integration. Additionally, we are working with a Medicare Advantage provider to offer home delivered meals and a micro assessment for the specific chronic conditions of renal failure and CHF. A recent referral led us to discover a member who was identified to be in need of meals yet we discovered that he had no working stove nor a microwave. Clearly his issues were more complex than the provider could know and it was a clear demonstration of the need to integrate health care and social services.

5. Integrating core programs with ACL discretionary programs addressed in Focus Area B below.

B. ACL Discretionary Grants & Other Funding Sources

ACL Discretionary grants include:

1. Integrating ACL Discretionary Grants with OAA core programs above (Focus Area A);

Dementia Capable Maine –

Project Summary: The project will conduct these activities:

- **Persons Living Alone with Alzheimer’s Disease and Related Dementia (ADRD)—** SeniorsPlus will modify the Meals on Wheels (MOW) Expanded Assessment to include questions on identifying persons living alone and develop a protocol to refer up to 120 live alones to support services. SP will develop a Community Support Program to provide person centered care management to 60 clients living alone.
- **People Aging with Intellectual and Developmental Disabilities (IDD) and ADRD or those at high risk of developing ADRD—**SP will expand their MOW program to serve 35 new clients that do not currently qualify for MOW including caregivers, persons living alone with ADRD or

those at risk of AD/DRD. MaineHealth will offer dementia training to physicians, nurse practitioners, and medical assistants in Androscoggin, Oxford and Franklin counties. MaineHealth will train 30 nurse care managers in dementia symptom management, working effectively with patients and administration of the REACH (Resources for Enhancing Alzheimer's Caregiver Health) Caregiver Risk Assessment tool. SP will form relationships with IDD providers in order to improve linkages between Area Agencies on Aging and IDD providers.

- **Behavioral symptom management training and expert consultation to family caregivers—** MaineHealth and SeniorsPlus will train 6 staff in REACH Community and deliver the intervention to 24 individuals. Eastern Area Agency on Aging and SP will train eight staff in Music & Memory and offer the program to 50 individuals. Alzheimer's Association of Maine will train SP staff and volunteers in support group facilitation and caregiver education to deliver to caregivers in Western Maine.

Evidence-Based or Evidence-Informed Intervention

- REACH Community (evidence-informed) is an intervention designed to identify and reduce risk factors for family caregivers.
- Music & Memory (evidence-informed) aims to have a calming effect and foster positive emotions by playing the person with dementia's favorite music.

C. Participant-Directed/Person-Centered Planning

Making fundamental changes in agency policies and programs that support consumer control and choice is recognized as a critical focus for Area Plans. OAA Title VII programs and services are designed to support this effort, and opportunities also exist for maximizing consumer control and choice in Title III and VI programs. Supporting participant-directed/person-centered planning for older adults and their caregivers across the spectrum of long-term care services, including home and community settings; and connecting people to resources.

1. Choice is critical to people being their own best navigator and advocate. We strongly support person centered planning. As the largest service coordination agency in Maine, SeniorsPlus, provides care coordination services to nearly 4500 clients across the state. Our team of 50 care coordinators are place based across the state so that they are aware of not only the formal network of services but also the informal network. We contract with MaineCare and the Department of Health and Human Services (DHHS) Maine for HCBS (Home and Community Based Services) Waiver, State Plan and state funding Home Based Care. As well, we provide services to the Other Related Conditions waiver and Money Follows the Person Program.

Choice and person centered planning are key components across our agency services. We use the options counseling model within our community services program, helping clients to understand their options and to support the informed decisions that that make for their individual circumstances.

Throughout the agency, we consider ourselves navigators, offering choices and supporting clients. We are "Switzerland", working to negate bias and allow free choice for all who are competent to make informed choices.

D. Elder Justice

This area focuses on coordinated programs and services for the protection of vulnerable adults under Title VII of the Older Americans Act. Describe plans and include strategies and performance measures that measure your progress towards:

SeniorsPlus staff are mandated reporters. We train staff upon hire and do refresher training annually to assure that all reporting is done timely. We make reports directly to Adult Protective Services.

We also work closely with the Long Term Care Ombudsmen Program (LTCOP). Several of the staff at the office of LTCOP were formerly employees of SeniorsPlus and strong working relationships are long established.

Several staff are members of local Elder Abuse Task Forces and we annually send a strong contingent of staff to the annual statewide Elder Abuse conference for continual training.

Nutrition assessors utilize the Elder Abuse Suspicion Index (EASI), elder abuse suspicion index, as a routine part of assessment and reassessments.

Maine has a strong partnership between Legal Services for the Elderly and the AAAs. LSE attorneys are co-located within our agencies. In addition to serving clients with legal assistance, they routinely provide educational sessions for older people at our sites.

E. Other Focus Areas to Be Addressed.

Other focus areas to consider in the area plan are:

1. Transportation – SeniorsPlus receives a modest \$10,000 annually for medical rides. We contract this out to local transportation providers. We assist clients in exploring transportation options in their local areas and we advocate on the state and local levels for increased transportation options.
2. Housing – SeniorsPlus provides resident services coordination for a large senior housing development in Lewiston Maine.

Our primary work in this area is working with clients to determine their housing needs and helping them navigate the system of getting on waiting lists. There is significant need for more housing options and as a member of the Maine Council on Aging, we advocate for increased resources for the development of more housing and for local ordinances to allow for more housing options such as in-law apartments.

3. Diversity and Inclusion

We seek to be welcoming and inclusive of diversity. Maine is primarily a white state, however, in Androscoggin County, we have a significant number of Somali people. We have and continue to find ways to reach out to the Somali community. We offered a congregate dining site but found that not to be effective. We are working on recruiting “new Mainers” to our board of directors.

We have a solid relationship with SAGE Maine. We have strong diversity among our staff members from the LGBTQ community. A human resource goal for our agency is have a board and staff who are reflective of the communities we serve.

Goals, Objectives, Strategies, and Performance Measures

Goal 1: Support older Mainers and their care partners to remain active and healthy in their communities of choice for as long as possible.

Objectives	Strategies	Performance Measures
1.1 Title III B Access to Services: Increase awareness of local services and programs available to older Mainers and their care partners with an emphasis on transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities.	1.1.1 Create and distribute marketing material to healthcare practices, municipal offices, and other places that older people and adults with disabilities frequent. The materials will promote SeniorsPlus as the resource for answers on aging that include, but are not limited to; transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities.	1.1.1A Distribute materials to 25 locations per year. Baseline: 25 per year
	1.1.2 Provide community education to providers, community groups, age friendly communities, and the general public on programs and services available to older Mainers and care partners.	1.1.2A Deliver 12 presentations on agency programs and community services per year.
1.2 Title III B Access to Services: Promote the Aging and Disability Resource Centers at each area agency on aging in Maine as valuable resources of information and service navigation.	1.2.1 Host open houses in each SeniorsPlus location.	1.2.1A Host 1 open house per year at 3 SeniorsPlus locations.
		1.2.1B Host 25 people at each open house per year.
	1.2.2 Leverage partnerships with other CBO's to promote the ADRC.	1.2.2A Participate in 10 partner hosted or co-sponsored events per year.

Objectives	Strategies	Performance Measures
<p>1.3 Title III B Access to Services: Improve access to services and programs for underserved populations and their caregivers, such as older Native Americans, older New Mainers, LGBTQ older adults, older adults experiencing homelessness, remote island communities, rural and frontier communities, older adults with limited English proficiency, and older adults with sensory impairments.</p>	<p>1.3.1 Ensure all direct service staff complete cultural consideration training.</p>	<p>1.3.1A Provide one cultural consideration training to staff each year.</p>
	<p>1.3.2 Identify natural gathering locations of underserved populations and assess viability of delivering services at those locations.</p>	<p>Baseline: 0</p> <p>1.3.2A Identify and assess one new location per year.</p>
<p>1.4 Title III B In-Home Services: Provide in-home services and supports, such as Homemaker, Personal Care, Chore, and Adult Day, to older Mainers.</p>	<p>1.4.1 Contract with local service providers to provide in-home services not offered by the area agency on aging.</p>	<p>1.4.1A Increase the number of persons and units served in-home services by 1% each fiscal year, as reported in the statewide database, after establishing baseline in FFY2021.</p>
<p>1.5 Title III B Legal Assistance: Provide legal assistance to older Mainers with economic and social needs.</p>	<p>1.5.1 Contract with a single legal assistance agency to provide legal assistance.</p>	<p>Increase the number of persons and units served legal assistance by 1% each fiscal year as reported in the statewide database.</p>
<p>1.6 Title III C Nutrition Services: Ensure access to local congregate dining options.</p>	<p>1.6.1 Build partnerships with restaurants, nonprofit and community based entities to combine congregate dining with other social activities.</p>	<p>1.6.1A Build 1 new partnership per year.</p>
	<p>1.6.2 Survey clients and community partners to assess activities and amenities for recruiting and maintaining congregate dining participants.</p>	<p>1.6.2A Increase the response rate of client surveys by 10% at dining sites and congregate dining partner locations each year.</p>
<p>1.7 Title III C Nutrition Services: Enhance the quality and variety of meals offered to older</p>	<p>1.7.1 Offer specialized meal plans to individuals based on cultural preference, personal choice, and health status.</p>	<p>1.7.1A Increase the number of special meal offerings based on identified client needs and preferences.</p>

Objectives	Strategies	Performance Measures
Mainers to allow for personal choice, dietary restrictions, and cultural differences.		Baseline: 4 special meals plans
1.8 Title III D Evidence-Based Programs: Maintain participation in evidence-based programs, including, but not limited to, SAVVY Caregiver, falls prevention, and chronic disease self-management.	1.6.1 Promote and offer evidence-based programs in underserved areas.	1.6.1A Hold workshops at 2 new locations per year.
	1.6.2 As a joint venture partner in Healthy Living for ME, SeniorsPlus will actively seek new and innovative funding sources.	1.6.2A Create 1 new funding partner per year.
1.9 Title III E Care Partner Services: Provide information to care partners of older Mainers about available services.	1.9.1 Provide outreach events targeting care partners of older Mainers about available resources.	1.9.1A Host at least one outreach event each fiscal year.
1.10 Title III E Care Partner Services: Assist care partners of older Mainers with accessing available services.	1.10.1 Assess care partners on their unique needs using a standard care partner assessment.	1.10.1A Increase the number of care partners assessed by 1% each fiscal year.
	1.10.2 Provide service navigation as care partners seeks available services.	1.10.2A Increase the number of care partners provided service navigation by 1% each fiscal year.
		1.10.2B Increase the number of service navigation hours provided to care partners by 1% each fiscal year.
1.11 Title III E Care Partner Services: Provide education and training to care partners of older Mainers.	1.11.1 Provide individual counseling to care partners older Mainers to educate them on their care partner roles.	1.11.1A Increase the number of care partners provided individual counseling by 1% each fiscal year.
	1.11.2 Provide support groups to care partners of older Mainers to learn from their peers about being care partners.	1.11.2A Host at least 3 support groups for care partners each fiscal year.
		1.11.2B Increase the number of care partners who attended support groups by 1% each fiscal year.

Objectives	Strategies	Performance Measures
1.12 Title III E Care Partner Services: Provide respite services to care partners of older Mainers.	1.12.1 Provide in-home respite services to care partners of older Mainers.	Increase the number of care partners served in-home respite services by 1% each fiscal year.
		Increase the number of in-home respite hours provided to care partners by 1% each fiscal year.
	1.12.2 Provide out-of-home respite services as a respite service to care partners of older Mainers.	Increase the number of care partners served out-of-home respite services by 1% per year.
		Increase the number of out-of-home respite service hours provided to care partners by 1% each fiscal year.
1.13 Title III E Care Partner Services: Provide supplemental services, such as In-Home Services, on a limited basis to care partners of older Mainers.	1.7.1 Maintain a resource database of all sources of support for care partners.	1.7.1A Update the resource database twice a year.
	1.7.2 Provide supplemental services through Dementia Capable Maine grant, to care partners in the form of home delivered meals, REACH Community™, intensive care management, and Music and Memory™.	1.7.2A Monitor clients served through Dementia Capable Maine grant to establish baseline.
1.14 Title III E Care Partner Services: Enhance respite services to care partners of older Mainers to maximize the utilization of other care partner services, such as evidence-based programs, support groups, and counseling.	1.14.1 Educate care partners on services available to them such as Savvy Caregiver Training, support groups, and counseling.	1.14.1A Increase in number of care partners educated on available resources by 5% each year.
	1.14.2 Explore utilization of respite funds to support care partner attendance at Savvy Caregiver and Support group activities.	1.14.2A Track number of care partners and funds utilized to attend Savvy Caregiver and Support group activities per year.

Objectives	Strategies	Performance Measures
1.15 Title III E Care Partner Services: Increase awareness of and access to the Family Caregiver Support Program to Older Relative Caregivers.	1.15.1 Explore the development of services to address the unique needs and challenges of older relative caregivers.	1.15.1A Develop new programs such as a daytime support group for kinship caregivers by 9/30/2021.
1.16 Assistive Technology: Increase awareness of and access to public and privately funded Assistive Technology programs and resources.	1.16.1 Enhance and strengthen the relationship with CITE Maine to stay current with assistive technology developments and funding sources.	1.16.1A Host annual meeting with CITE Maine and increase referrals to CITE Maine by 10% each year.
	1.16.2 Maintain a lending closet for DME and other assistive technology.	1.16.2A Maintain current lending levels. Baseline:300 per year
1.17 Advocacy: Support capacity-building initiatives to strengthen Maine's aging and disability service networks at the state and local levels through advocacy and participation in leadership activities.	1.17.1 Maintain membership and leadership in the Maine Council on Aging and local health initiatives.	1.17.1A Develop and deliver testimony on policy initiatives.
		1.17.1B Participate in 3 new local health initiatives.
1.18 Advocacy: Support local and statewide age-friendly initiatives through advocacy and participation in leadership activities.	1.18.1 Maintain membership and leadership in local and statewide age-friendly initiatives including, but not limited to the Age Friendly State Advisory Committee, local Elder Abuse Prevention Task Forces.	1.18.1A Participate in 3 initiative each year.

Goal 2: Enhance the quality of programs through data standardization, program evaluation, and outcome measurement.

Objectives	Strategies	Performance Measures
2.1 Develop and implement statewide intake, assessment, and referral standards to ensure consistency and increase efficiency.	2.1.1 Participate in workgroups to explore the development and implementation of statewide intake and assessment standards.	2.1.1A Attend at least 75% of workshops hosted by the state each year.
2.2 Improve data collection methodologies using standard service definitions and utilizing data management resources effectively to ensure statewide consistency.	2.2.1 Participate in a statewide effort to improve data collection, definitions, and data management.	2.2.1A Decrease the percentage of data missing in the agency's annual performance report by 2% each year.
2.3 Evaluate the effectiveness of services and programs in meeting the preferences and unmet needs of older Mainers, adults with disabilities, and their care partners using outcome measurements.	2.3.1 Conduct surveys to evaluate service delivery preferences and effectiveness for all services.	2.3.1A Create and distribute client satisfaction surveys: Baseline: Quarterly I&A, Family Caregiver and Medicare. Baseline: Annually for HDM and Congregate clients.

Assurance and Required Activities

(1) SeniorsPlus (the “agency”) has described in this plan all of the agency’s activities. The agency assures that these activities conform to the responsibilities of the area agency, laws, regulations, and State policy. The agency also agrees to administer its programs in accordance with the Act, the area plan, and all applicable regulations, policies, and procedures. The agency assures that it has written policies and procedures for carrying out all of its functions and that such procedures are available for review by the Office of Aging and Disability Services.

Sec. 306, AREA PLANS

(a) Each area agency on aging designated under section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with section 307(a)(1). Each such plan shall—

- (1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;
- (2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—
 - (A) services associated with access to services (transportation, health services (including mental and behavioral health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);
 - (B) in-home services, including supportive services for families of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
 - (C) legal assistance;
 and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;
- (3) (A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and
 - (B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;
- (4) (A)(i)(I) provide assurances that the area agency on aging will—
 - (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

- (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
- (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub-clause (I);
- (ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—
 - (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
 - (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
 - (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and
- (iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared —
 - (I) identify the number of low-income minority older individuals in the planning and service area;
 - (II) describe the methods used to satisfy the service needs of such minority older individuals; and
 - (III) provide information on the extent to which the area agency on aging met the objectives described in clause (i).
- (B) provide assurances that the area agency on aging will use outreach efforts that will—
 - (i) identify individuals eligible for assistance under this Act, with special emphasis on—
 - (I) older individuals residing in rural areas;
 - (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (IV) older individuals with severe disabilities;
 - (V) older individuals with limited English proficiency;

- (VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
 - (VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and
- (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and
- (C) contain an assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.
- (5) provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities;
- (6) provide that the area agency on aging will—
- (A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;
 - (B) serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;
 - (C) (i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;
 - (ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that—
 - (I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or
 - (II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs;
- and that meet the requirements under section 676B of the Community Services Block Grant Act; and
- (iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work

in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

- (D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;
 - (E) establish effective and efficient procedures for coordination of—
 - (i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and
 - (ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;
 - (F) in coordination with the State agency and with the State agency responsible for mental and behavioral health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental and behavioral health services (including mental health screenings) provided with funds expended by the area agency on aging with mental and behavioral health services provided by community health centers and by other public agencies and nonprofit private organizations;
 - (G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;
 - (H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and
 - (I) to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals;
- (7) provide that the area agency on aging shall, consistent with this section, facilitate the areawide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by—
- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

- (B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better—
 - (i) respond to the needs and preferences of older individuals and family caregivers;
 - (ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and
 - (iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;
 - (C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and
 - (D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information relating to—
 - (i) the need to plan in advance for long-term care; and
 - (ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources;
- (8) provide that case management services provided under this title through the area agency on aging will—
- (A) not duplicate case management services provided through other Federal and State programs;
 - (B) be coordinated with services described in subparagraph (A); and
 - (C) be provided by a public agency or a nonprofit private agency that—
 - (i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;
 - (ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
 - (iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
 - (iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);
- (9) (A) provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title;

- (B) funds made available to the area agency on aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;
- (10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;
- (11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—
- (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
 - (B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
 - (C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans;
- (12) provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b) within the planning and service area.
- (13) provide assurances that the area agency on aging will—
- (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;
 - (B) disclose to the Assistant Secretary and the State agency—
 - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
 - (ii) the nature of such contract or such relationship;
 - (C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;
 - (D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and
 - (E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;
- (14) provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;
- (15) provide assurances that funds received under this title will be used—
- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

- (B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;
- (16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;
- (17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery;
- (18) provide assurances that the area agency on aging will collect data to determine—
 - (A) the services that are needed by older individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019; and
 - (B) the effectiveness of the programs, policies, and services provided by such area agency on aging in assisting such individuals; and
- (19) provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on those individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019.

(b)(1) An area agency on aging may include in the area plan an assessment of how prepared the area agency on aging and service providers in the planning and service area are for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

- (2) Such assessment may include—
 - (A) the projected change in the number of older individuals in the planning and service area;
 - (B) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;
 - (C) an analysis of how the programs, policies, and services provided by such area agency can be improved, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the planning and service area; and
 - (D) an analysis of how the change in the number of individuals age 85 and older in the planning and service area is expected to affect the need for supportive services.
- (3) An area agency on aging, in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the area agency to build the capacity in the planning and service area to meet the needs of older individuals for—
 - (A) health and human services;
 - (B) land use;
 - (C) housing;
 - (D) transportation;
 - (E) public safety;
 - (F) workforce and economic development;

- (G) recreation;
- (H) education;
- (I) civic engagement;
- (J) emergency preparedness;
- (K) protection from elder abuse, neglect, and exploitation;
- (L) assistive technology devices and services; and
- (M) any other service as determined by such agency.

(c) Each State, in approving area agency on aging plans under this section, shall waive the requirement described in paragraph (2) of subsection (a) for any category of services described in such paragraph if the area agency on aging demonstrates to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services in such area and had conducted a timely public hearing upon request.

(d)(1) Subject to regulations prescribed by the Assistant Secretary, an area agency on aging designated under section 305(a)(2)(A) or, in areas of a State where no such agency has been designated, the State agency, may enter into agreement with agencies administering programs under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act for the purpose of developing and implementing plans for meeting the common need for transportation services of individuals receiving benefits under such Acts and older individuals participating in programs authorized by this title.

- (2) In accordance with an agreement entered into under paragraph (1), funds appropriated under this title may be used to purchase transportation services for older individuals and may be pooled with funds made available for the provision of transportation services under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act.

(e) An area agency on aging may not require any provider of legal assistance under this title to reveal any information that is protected by the attorney-client privilege.

(f)(1) If the head of a State agency finds that an area agency on aging has failed to comply with Federal or State laws, including the area plan requirements of this section, regulations, or policies, the State may withhold a portion of the funds to the area agency on aging available under this title.

- (2) (A) The head of a State agency shall not make a final determination withholding funds under paragraph (1) without first affording the area agency on aging due process in accordance with procedures established by the State agency.
 - (B) At a minimum, such procedures shall include procedures for—
 - (i) providing notice of an action to withhold funds;
 - (ii) providing documentation of the need for such action; and
 - (iii) at the request of the area agency on aging, conducting a public hearing concerning the action.

(3) (A) If a State agency withholds the funds, the State agency may use the funds withheld to directly administer programs under this title in the planning and service area served by the area agency on aging for a period not to exceed 180 days, except as provided in subparagraph (B).

(B) If the State agency determines that the area agency on aging has not taken corrective action, or if the State agency does not approve the corrective action, during the 180-day period described in subparagraph (A), the State agency may extend the period for not more than 90 days.

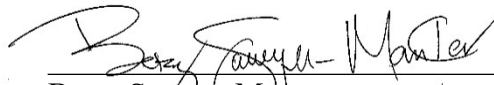
(g) Nothing in this Act shall restrict an area agency on aging from providing services not provided or authorized by this Act, including through—

(1) contracts with health care payers;

(2) consumer private pay programs; or

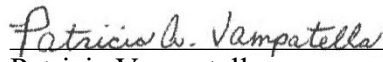
(3) other arrangements with entities or individuals that increase the availability of home and community-based services and supports.

November 30, 2020
Date



Betsy Sawyer-Manter
President and CEO
SeniorsPlus

November 30, 2020
Date



Patricia Vampatella
Chair of Board of Directors
SeniorsPlus

Public Hearing Comments & Corrections

May 28, 2020: FOR IMMEDIATE RELEASE

Contact: Holly Zielinski (hzielinski@seniorsplus.org) or Nate Miller (nmiller@seniorsplus.org) at 207-795-4010

SeniorsPlus Announces Public Hearings Offered via Webinar

(Lewiston, ME) – - SeniorsPlus, the designated Area Agency on Aging for Androscoggin, Franklin, and Oxford counties, is holding two public hearings on its 2020-2024 Area Plan that outlines the organization’s vision to serve the older and disabled adults populations over the next four years.

The public is invited to participate. Comments also are welcome via email or US Mail. Written comments must be received on or before June 27, 2020 via mail to SeniorsPlus, 8 Falcon Road, Lewiston ME, 04240 or via email to hzielinski@seniorsplus.org. For more information, visit www.seniorsplus.org or call 1-800-427-1241.

Area Plan on Aging Public Hearing Dates

Tuesday, June 16th 10 AM

To register please call 795-4010 or 1-800-427-1241

Wednesday, June 17th at 1 PM

To register please call 795-4010 or 1-800-427-1241

An advanced draft plan can be reviewed on our website between June 1 and June 17, 2020, or interested parties may request a copy by calling the office of SeniorsPlus at 795-4010 or 1-800-427-1241.

Established in 1972, SeniorsPlus is the Western Maine designated Agency on Aging covering Franklin, Oxford and Androscoggin counties. The overall program goal of SeniorsPlus, which is headquartered in Lewiston, is to assist older adults and adults with disabilities in Franklin, Oxford and Androscoggin counties to remain safely at home for as long as possible. The mission of SeniorsPlus is to enrich the lives of seniors and adults with disabilities. SeniorsPlus believes in supporting the independence, dignity and quality of life of those we serve.

Public Hearing Comments and Corrections

Appendix A: SeniorsPlus Board of Directors

Officers:

Pat Vampatella, Chairperson

Dennis Gray, Vice Chair

Annette Nadeau, Treasurer

Linda Snyder, Secretary

Directors:

Don Berry

Irving Faunce

James Handy

John Jenness, Jr.

Cheryl-ann Jerry

Robert Kirchherr

Larry Morin

Mark Prevost

Dawn Richardson

Appendix B: SeniorsPlus Advisory Council

Pat McCluskey, Chairperson

(vacant), Vice Chair

Irving Faunce

Cheryl-ann Jerry

Kenneth Jerry

Susan Loughrey

Laura Sturgis

Appendix C: Current Services

SeniorsPlus is the Community Services Information and Assistance for Androscoggin, Franklin and Oxford counties. Our mission is to provide assistance to older adults and adults with disabilities wishing to remain independently in their own homes as long as possible.

Nutrition Services:

- Lunch Plus Cafes– Meals are served in a group setting to individuals age 60 and older, and adults with disabilities. Each meal provides at least 1/3 of the current nutritional recommended daily allowance.
- Meals on Wheels – Home Delivered Meals are served to individuals age 60 and older and adults with disabilities who are homebound and unable to regularly prepare meals for themselves. Each meal provides a minimum of 1/3 of the current nutritional recommended daily allowance.
- Around Town – a restaurant voucher program that allows clients to use a voucher to “buy” a meal at a local restaurant, using a special SeniorsPlus menu. These meals provide 1/3 of the recommended nutrition, and offer a chance for socialization with friends and family at a favorite restaurant.
- Books on Wheels – this wrap-around service to homebound older adults does library book deliveries and pick-ups with the Meals on Wheels delivery.
- Pets on Wheels – another wrap-around service to homebound older adults provides pet food to Meals on Wheels clients. This maintains the companionship and meaning in life that pets provide.

Community Services Information and Assistance:

Telephone and in-person assistance at no cost. Our aging and disability specialists assist Clients by:

- informing them of available resources and services,
- assessing their needs,
- referring them to other agencies as appropriate,
- assisting and advocating for them in gaining access to needed services,
- assisting any adult in identifying options and planning for their future as they age,
- assisting Clients with completion of applications for services

Medicare Counseling:

One on one counseling and community education about Medicare, supplemental plans, Part D prescription plans and how to spot and report fraud. Assistance with applications for Medicare savings programs, understanding confusing Medicare communications and advocating for corrections to clients' policies and claims.

Caregiver Support Program:

Families caring for an older adult or grandparents caring for grandchildren receive education on caregiving skills (including the evidence-based Savvy Caregiver program), support groups, one on one support and information on resources in the community. Those caring for someone with dementia may be eligible for reimbursement for respite services.

Community Education:

Education to individuals and communities about health, wellness, prevention and other issues of importance. SeniorsPlus Education Center in Lewiston provides an on-going menu of classes and workshops, with Long Distance Learning connections to locations in Oxford and Franklin counties once a month.

Education is also provided by a monthly newspaper newsletter reaching all households in the 3 counties. The Aging Well Living Well Expo is held annually at Sunday River – a one-day conference of education and experiential learning for all clients.

SeniorsPlus also offers evidence-based workshops. Living Well for Better Health helps participants self-manage chronic disease. Tai Chi for Better Health and Matter of Balance are evidence-based falls prevention workshops.

Money Minders:

Assistance to older adults who are having a hard time managing their finances (bill-paying, budgeting and checkbook balancing) is provided through volunteers on a monthly basis.

Veterans Independence Program:

Providing care coordination for a veteran-directed home care support program. The program focuses on keeping veterans at home who are at risk for nursing home care. Veterans direct their own care, hire their support workers and services.

Resident Service Coordination:

Providing support for residents of housing units, through contracts with the property management companies. This support includes assessments, assistance, education, referrals, and case management.

AREA AGENCY ON AGING
Appendix D: Direct Service Waiver Requests

DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
 (as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. SeniorsPlus

2/24/2020

A. AGENCY NAME: SeniorsPlus

B. DIRECT SERVICE DESCRIPTION: Evidence Based Programs

C. SPECIFIC SERVICE NEED:

- i. Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
- ii. Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.

Our overall program goal is to assist older adults and adults with disabilities in our tri-county area to remain at home safely for as long as possible. The overwhelming majority of older adults (greater than 95% in an AARP survey) wish to remain at home until they die. Chronic disease and falls often pose a challenge for this goal. According to the Center for Disease Control and Prevention (CDC) 2.5 million people are treated for falls each year costing \$34 billion dollars annually. The CDC also notes that providers can reduce fall risk factors with Evidence Based Programming. The CDC contributes chronic diseases to the most common causes of death, disability and healthcare spending. Chronic Diseases and falls can be prevented and managed with outreach and information through Evidence Based Programs.

SeniorsPlus is a trusted source of information within our tri-county area. Evidence Based Programs help SeniorsPlus reach our mission of helping people to be as independent and as healthy as possible in their own communities. SeniorsPlus provides Evidence Base Programs that are not otherwise available in our area. SeniorsPlus has facilities in all 3 counties, trained staff and volunteers, and partner agencies that provide the unique infrastructure needed to deliver these services SeniorsPlus is mandated by the federal government to provide Evidence Based Programs.

D. AVAILABILTY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

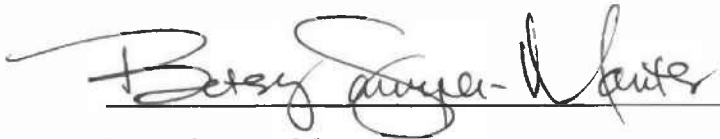
- i. there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;

- ii. there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

SeniorsPlus provides Evidenced Based Programs within the tri-county areas that are not otherwise provided. We seek to augment services not to duplicate those that may be offered through another local provider. SeniorsPlus is the expert on aging and a trusted partner in the community. There is no other program with the capacity to provide this service throughout the tri-county area. SeniorsPlus has the facilities, trained staff and volunteers and community partners unique to solving the problems of chronic diseases and falls.

SeniorsPlus has an extensive volunteer network and infrastructure in place to manage the clients' needs of our area. When there is already an existing program servicing a select population, we work to support that existing program and not to duplicate that service. Our Evidenced Based Programs are delivered in accordance with the policies set forth by the federal mandate.

SeniorsPlus along with Spectrum Generations and Aroostook Area Agency on Aging have formed a joint venture called Healthy Living for ME (HL4ME). HL4ME is a statewide collaboration to increase participation in Evidence Based Programs by working with community partners and training volunteers to lead the classes and assure that the fidelity of the Evidence Based Program is maintained to receive proven positive outcomes.

 5/12/20

Betsy Sawyer-Manter
President and CEO
SeniorsPlus

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.



5/19/2020

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
 (as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. SeniorsPlus

2/24/2020

A. AGENCY NAME: SeniorsPlus

B. DIRECT SERVICE DESCRIPTION: Nutrition – Home Delivered Meals

C. SPECIFIC SERVICE NEED:

- i. Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
- ii. Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.

Our overall program goal is to assist older adults and adults with disabilities in our tri-county area to remain at home safely for as long as possible. The overwhelming majority of older adults (great than 95% according to an AARP survey) wish to remain at home until they die. The SeniorsPlus nutrition program is designed to increase the probability that older adults will remain independently in their home through the aging process. Nutrition is one of the most basic building blocks of health for people of any age, and the critical piece that will make that possible is the provision of a single meal once a day. People unable to cook for themselves (for example, unsteady standing long enough to prepare a meal, have a high fall risk and cannot be near the stove, eating only unhealthy packaged food because they lost their spouse and never learned to cook), their lack of food, and more importantly, nutritious food, increases their risk of disease, depression and mortality. Lastly, because they are most often living alone, they may have no one checking on their safety on a regular basis. The Meals on Wheels driver may be the only person they see all week. The provision of a meal addresses all of these needs – a nutritious meal, a safety check, and a social interaction. We know that if older adults have good nutrition and socialization, they have overall good health.

Maine has one of the highest incidences of food insecurity in New England. SeniorsPlus works diligently at fundraising efforts to alleviate the need for a waitlist whenever possible. However, the increasing demand and uncertainty of funding sources keep the possible of a waitlist an ever present possibility.

D. AVAILABLITY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:


Please explain why:

- i. there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;
- ii. there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

SeniorsPlus is the only program in the tri-county areas that has the capacity to deliver 130,000+ meals across the tri-county area. We have the infrastructure to purchase, prepare, and distribute meals through our Meals on Wheels program or at Congregate dining sites.

SeniorsPlus has an extensive volunteer network and infrastructure in place to manage the nutrition program. No other resource has a tri-county reach. Our food costs are well managed as a result of the economy of scale of our program.

SeniorsPlus contracts with the Southern Maine Agency on Aging (SMAA) for the western section of Oxford County. SMAA's service area is contiguous to the western region and is able to deliver meals more effectively and efficiently than SeniorsPlus.

 5/12/20

Betsy Sawyer-Manter
President and CEO
SeniorsPlus

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.



5/19/2020

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
 (as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. SeniorsPlus

2/24/2020

A. AGENCY NAME: SeniorsPlus

B. DIRECT SERVICE DESCRIPTION: Congregate Dining

C. SPECIFIC SERVICE NEED:

- i. Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
- ii. Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.

The Older Americans Act designated part of the funding to be spent to provide opportunities for older adults to gather together and receive a nutritious meal and an opportunity to socialize with others in the community. This opportunity works to alleviate two risks that develop as a normal part of aging– inability or loss of desire to prepare nutritious meals, and isolation, both of which research shows, have adverse health outcomes. SeniorsPlus finds communities where there is a willing partner to provide space for these meals (i.e. town hall, church, seniors housing, community center).

SeniorsPlus helps communities set up these community dining sites by providing delivered hot meals and staff/volunteers to manage the service of the meal, the nutrition activities and all safety requirements set by the state, or in some instances we partially reimburse the community dining site for the meals served when they prepare their own meals and manage their site under the guidelines set forth by the state and SeniorsPlus (for example homeless shelters serving older homeless people). All meals/menus are approved by a Registered Dietician to meet one-third of the daily recommended intake for older adults. The nutrition activities include frequent nutrition education and nutrition counseling to those who may need it. As the Baby Boomers generation aged into our services, it was clear that this new generation of older adults did not enjoy getting together in a community site as much, so we added an alternative with our Around Town program. We partner with local restaurants that older adults frequent. People get a voucher from SeniorsPlus and go to a restaurant from our available list and use the SeniorsPlus menu to order. This is monitored by a Registered Dietician to provide the same nutritional value.

Our tri-county area is very rural making it difficult for older adults to get the socialization they need and since Maine is the oldest state in the nation, SeniorsPlus is obligated to provide these services to the many older adults in our service area.

D. AVAILABILTY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

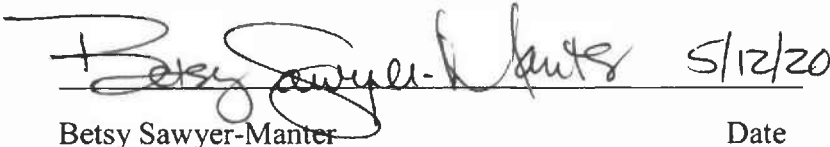
Please explain why:

- i. there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;

ii. there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

SeniorsPlus is the only program in the tri-county areas that has the staffing and infrastructure to reach out to all of the communities that we serve. We are already in these communities with our Meals on Wheels program.

SeniorsPlus has over 400 volunteers to help us throughout our tri-county area. When there is already an existing community dining service we work to support the existing service and do not duplicate that service. With our existing infrastructure we are most efficient and cost effective as a result of the economy of scale of our program.

 5/12/20

Betsy Sawyer-Manter
President and CEO
SeniorsPlus

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.



5/19/2020

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services